Case 19-13294-elf Doc 20 Filed 10/14/19 Entered 10/14/19 11:29:59 Desc Main Document Page 1 of 2

							ı				
	in this information btor 1	Brian Griffit									
	btor 2 buse, if filing)					_					
Uni	ited States Bankrup	otcy Court for the	: EASTERN DISTRICT	OF PENNSYLVANI	A						
Case number 19-13294							Ch	eck if this is	:		
(If kı	nown)			-				An amende	ed filing		
										g postpetition ollowing date:	
0	fficial Form	106 <u>l</u>						MM / DD/ Y	YYYY	-	
S	chedule I:	Your Inc	ome								12/15
spo atta Pa	use. If you are sel ch a separate she rt 1: Describ	parated and you eet to this form. be Employment	are married and not fili ir spouse is not filing w On the top of any additi	ith you, do not inclu	ude infor	mati	on abo	out your spe	ouse. If mo	ore space is	needed,
1.	Fill in your emp information.	ioyment		Debtor 1				Debtor 2 or non-filing spouse			
	If you have more	ate page with	Employment status	■ Employed			☐ Empl	☐ Employed			
	information abou			☐ Not employed				☐ Not employed			
	employers.		Occupation	Laborer							
	Include part-time self-employed wo		Employer's name	Robesonia Log	jistics						
	Occupation may or homemaker, if										
			How long employed t	here? started	d 9/23/19	•					
Pai	rt 2: Give De	etails About Mor	nthly Income								
	imate monthly inc use unless you are		ate you file this form. If	you have nothing to	report for	any	line, w	rite \$0 in the	space. Inc	clude your no	n-filing
	ou or your non-filing e space, attach a s		ore than one employer, co this form.	ombine the information	on for all e	emplo	oyers f	or that perso	on on the li	nes below. If	you need
							For D	Debtor 1		btor 2 or ing spouse	
2.		conthly gross wages, salary, and commissions (betions). If not paid monthly, calculate what the monthly			2.	\$		2,117.00	\$	N/A	
3.	3. Estimate and list monthly overtime pay.				3.	+\$		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$	2	,117.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Debtor 1		Brian Griffith			ase number (if known)	19-13294		
				1	For Debtor 1		Debtor 2 or filing spouse	
	Cop	y line 4 here	4.	-	\$2,117.00	\$	N/A	
5.	List	all payroll deductions:						
	5a. 5b. 5c. 5d. 5e. 5f. 5g.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues	5a. 5b. 5c. 5d. 5e. 5f.	. ;	\$ 507.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	\$ \$ \$ \$ \$ \$ \$ 	N/A N/A N/A N/A N/A N/A	- - - -
•	5h.	Other deductions. Specify:	_ 5h.		\$0.00		N/A	-
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	9		\$	N/A	-
7. 8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	7.	9	.,	\$	N/A	-
	8b.	monthly net income. Interest and dividends	8a. 8b.		\$\$ 0.00 \$ 0.00	\$	N/A N/A	-
	8d. 8e. 8f.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	8c. 8d. 8e.	. ;	\$ 0.00 \$ 0.00 \$ 0.00	\$ \$ \$ 	N/A N/A N/A	
		Specify:	8f.		\$ 0.00	\$	N/A	=
	8g.	Pension or retirement income	8g.		\$ 0.00	\$	N/A	-
	8h.	Other monthly income. Specify: help from son	8h.		\$ 500.00 \$ 52.00	+ \$	N/A	-
9.	Add	tax refund pro rata I all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		\$ \$	N/A N/A	<u> </u>
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	2,162.00 + \$		N/A = \$	2,162.00
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule adde contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe			·	chedule J. 11. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					12. \$	2,162.00
13.	Do y ■	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?				Combir monthly	ned y income

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